

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective October 1, 2000

Application or Docket Number

*D 66 815 USD*

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|                                  |                     |                          |
|----------------------------------|---------------------|--------------------------|
| TOTAL CLAIMS                     | <i>4</i>            | <input type="checkbox"/> |
| FOR                              | NUMBER FILED        | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | <i>4</i> minus 20 = | <i>-16</i>               |
| INDEPENDENT CLAIMS               | <i>1</i> minus 3 =  | <i>-2</i>                |
| MULTIPLE DEPENDENT CLAIM PRESENT |                     | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE

|           |               |
|-----------|---------------|
| RATE      | Fee           |
| BASIC FEE | 355.00        |
| X\$ 9=    |               |
| X40=      |               |
| +135=     |               |
| TOTAL     | <i>355.00</i> |

OTHER THAN  
SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | Fee    |
| BASIC FEE | 710.00 |
| X\$18=    |        |
| X80=      |        |
| +270=     |        |
| TOTAL     |        |

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    |                                  |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------|------------------------------------|---------------|
|  | CLAIMS REMAINING AFTER AMENDMENT | MINUS |                                    |               |
| Total  | *                                | Minus | **                                 | =             |
| Independent                                    | *                                | Minus | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |       |                                    |               |

SMALL ENTITY

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$ 9=           |                |
| X40=             |                |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

OTHER THAN  
SMALL ENTITY

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    |                                  |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------|------------------------------------|---------------|
|  | CLAIMS REMAINING AFTER AMENDMENT | MINUS |                                    |               |
| Total  | *                                | Minus | **                                 | =             |
| Independent                                    | *                                | Minus | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |       |                                    |               |

RATE  
ADDITIONAL FEE

|                  |  |
|------------------|--|
| X\$ 9=           |  |
| X40=             |  |
| +135=            |  |
| TOTAL ADDIT. FEE |  |

RATE  
ADDITIONAL FEE

|                  |  |
|------------------|--|
| X\$18=           |  |
| X80=             |  |
| +270=            |  |
| TOTAL ADDIT. FEE |  |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    |                                  |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------|------------------------------------|---------------|
|  | CLAIMS REMAINING AFTER AMENDMENT | MINUS |                                    |               |
| Total  | *                                | Minus | **                                 | =             |
| Independent                                    | *                                | Minus | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |       |                                    |               |

RATE  
ADDITIONAL FEE

|                  |  |
|------------------|--|
| X\$ 9=           |  |
| X40=             |  |
| +135=            |  |
| TOTAL ADDIT. FEE |  |

RATE  
ADDITIONAL FEE

|                  |  |
|------------------|--|
| X\$18=           |  |
| X80=             |  |
| +270=            |  |
| TOTAL ADDIT. FEE |  |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.